

CHILD PLACING AGENCY STATISTICAL SHEET

Please provide this questionnaire to the licensing representative during the study. Provide information through the month ending 30 days before the current license expires.

Agency Name: _____

Data Current through: _____ (month), _____ (year).

For agencies with multiple offices in Virginia, you may use separate statistical sheets for each office if you wish. If you do so, please designate which branch office each sheet represents. It is not necessary to compile an additional sheet for agency totals.

FOSTER CARE

1. Number of children under entrustment/commitment/placement agreement in foster home placement as of above date.

| Total Number | Male | Female | Black | White | Other |
|--------------|------|--------|-------|-------|-------|
| | | | | | |

2. Number of children indicated above by age:
Infancy to 4 _____ 13 to 17 _____
5 to 12 _____ 18 & older _____
3. Of the children in foster care, name the youngest _____; age _____; oldest _____; age _____.
4. Names of children in permanent foster care:

5. Names of children in independent living placements:

6. Number of children in child caring institutions _____, in group homes _____.
7. Names of children age 5 and older not attending school: _____

8. Names of children who have been moved from one foster home to another during the last calendar year with reasons for each move. (Exclude moves for respite care). _____

Revised: November, 2000

Child-Placing Agency Statistical Sheet

Names of children moved from one foster home to another with reasons in calendar year to date.
(Exclude moves for respite care).

Name of Child

Reason Terminated

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

FOSTER HOMES

1. Total number of approved foster homes available for use _____.

2. Number of homes with one child _____;
Number of homes with two children _____;
Number of homes with three children _____

| |
|-------|
| _____ |
| _____ |
| _____ |

Names of homes with four children _____

Names of homes with more than four children _____

3. Number of foster home inquiries since last renewal study _____; number of foster applicants receiving pre-service training since last renewal study _____; names of foster homes approved since last renewal study. _____

4. Number of foster parent applicants denied _____.

5. Names of foster homes terminated since last renewal study (*provide reasons for each*);

Name

Reason Terminated

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Child-Placing Agency Statistical Sheet

PREGNANCY COUNSELING

1. Number of clients served (*one interview or more*) last calendar year. _____.
2. Number of clients served (*one interview or more*) calendar year to date. _____.
3. Of the clients served during last calendar year, name the youngest _____, age _____; oldest _____, age _____.
4. Of the clients receiving service in #1 above, the number of clients placing their children for adoption _____, number keeping their children _____. Other plans _____

FOSTER HOME PLACEMENT OF PREGNANT CLIENTS

1. Number of clients for whom foster care was provided during last calendar year _____.
2. Names of minor clients for whom foster care was provided for more than three (3) months: Last calendar year _____; calendar year to date _____.

ADOPTIVE HOMES

1. Total number of adoptive homes approved and waiting (*exclude parental placement home studies*) _____.
2. Total number of families studied for parental placements during last calendar year _____; calendar year to date _____.
3. Number of families approved for:
Black infants _____;
White infants _____;
Mixed race infants _____;
Foreign born children _____;
Children with other special needs _____.
4. Number of singles (*exclude parental placements*) approved and waiting for placement _____.
5. Number of homes denied _____; Reasons: _____

CHILDREN PLACED FOR ADOPTION

1. Total number of children in agency custody in various stages of placement up to receipt of a final order of adoption _____. (Compile through the date of this questionnaire.)
2. Number of children in #1 above whose parental rights were terminated by voluntary entrustment by both parents _____.

Child-Placing Agency Statistical Sheet

Court commitment to the agency _____.

Entrustment by mother and affidavit or confirmation of notice received from biological father
_____.

Entrustment and affidavit of the mother only (*provide names of children*). _____

3. Of the children counted in #1 above:

Number of white infants placed _____;

Black infants _____;

Bi-racial infants _____;

Foreign children _____;

Children with special needs by virtue of age _____;

Disabilities _____;

Sibling group membership _____.

(*Pick only one category for each child.*)

4. Number of children under your adoptive supervision whose custody is held by another agency or individual _____.

5. Of the children counted in #4 above:

Number of white infants _____;

Black infants _____;

Foreign children _____;

Children with special needs by virtue of age _____;

Disabilities _____;

Sibling group membership _____.

(*Pick only one category for each child.*)

6. Number of adoption placements disrupting within the last calendar year _____; names
of children _____;
Calendar year to date _____; names of children _____
_____.

7. Number of adopted children placed out of state during the last calendar year _____; names
of children _____;
Calendar year to date _____; names of children _____
_____.

8. Number of children receiving subsidy to date _____.

9. Number of children deemed eligible for subsidy but not approved and/or receiving subsidy
(*provide reasons for each*): _____

_____.